PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

09	824	1625

									7-110	<u> </u>	1000	
CLAIMS AS FILED - PA (Column 1)						umn 2)		SMALL ENTITY TYPE			OTHER SMALL	R THAN ENTITY
TOTAL CLAIMS							[RATE	FEE	7	RATE	FEE
FC	OR 200	NUMBER	FILED	NUME	BER EXTRA	E	BASIC FEE	385.00	OR	BASIC FEE	770.00	
тс	OTAL CHARGE	ABLE CLAIMS	₽Ç mir	nus- 20 =	• •			XS 9=		OR	X\$18=	
INE	DEPENDENT C	LAIMS	12 mi	inus 3 =	*			X43=		OR	V06	
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT	:NT			-	+145=		OR		· · · · · ·
* If the difference in column 1 is less than zero, enter *					"0" in (column 2	L	TOTAL	38500	J		
	C	CLAIMS AS A	AMENDEL) - PAR	T II		c	· · · · · ·	700-]	OTHER	THAN
_		(Column 1)	<u></u>	(Colum		(Column 3)	•	SMALL E	ENTITY	OR	SMALL	
AMENDMENT PO		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	*	Minus	**		=	_	X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MU	JLTIPLE DEF	ENDEN	CLAIM		\	+145=		OR	+290=	
							L.	TOTAL		1	TOTAL	
	•	(Column 1)		(Colur	O)	(Column 3)	AD	DIT. FEE		J ,	ADDIT. FEE	<u></u>
ENT BO		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIO PAID F	EST BER OUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total		Minus	**		=]	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- 12.4	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM			+145=		OR	+290=	
								TOTAL DIT. FEE		- L	TOTAL ADDIT. FEE	•
		(Column 1)		(Colum	-n·0)	(Column 3)		باد. ۳ <u>دم ح</u>		, ,	WDII.T LL	
E	`	CLAIMS		HIGHE	ST	(COlumnia S)			-001	Г		ADDI-
AMENDMENT DO		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	BER USLY	PRESENT EXTRA	F		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	\	X\$ 9=		OR	X\$18=	٠.
1ME		11	Minus	***		=	5	X43=		OR	X86=	·
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM					⁵⁵ †		
• H	the enter in colur	4 in loce than th	= ==t=: in colur	O unito	in col	1	<u></u>	145=		OR	+290=	
** If	f the "Highest Nurr	mn 1 is less than the mber Previously Pai	id For IN THIS	S SPACE is	less than	n 20, enter "20."	ADE	TOTAL DIT. FEE		OR A	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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OATENT ADDITION SEE DETERMINATION DECORE							DD	Application of Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000								098-24625					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY					
TC	TAL CLAIMS		45				Γ	RATE FEE			RATE	FEE	
FOR			NUMBER FILED NUMBI			ER EXTRA	B	ASIC FE	שיוטגן.	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			45 ninus 20= 2			5		X\$ 9=	us.	OR	X\$18=		
IND	EPENDENT CL	AIMS	/0 . minus 3 = 7			7	t	x46= 204		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT						t	+135=	# " 	OR	+270=	<u>`</u> ــــــــــــــــــــــــــــــــــــ		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL	1990 -	OR			
	· C	LAIMS AS A	MENDED	- PAR	T II			IOIAL	OLD.		OTHER	THAN	
		(Column 1)		(Colur		(Column 3)	:	SMALL	ENTITY	OR	SMALL		
NTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 45	Minus	•• 4	15	=		X\$ 9=	_=	OR	X\$18=		
AME	Independent	• (7)	Minus	••• (0	=	ſ	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						T.	+135=		OR	+270=		
								TOTAL		1	TOTAL		
								DIT. FEE		JON.	ADDIT. FEE	-	
Ė	(Column 1) CLAIMS		(Colu				Г	–	ADDI-	•	 -	ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
NON	Total	. 46	Minus	•• L	1 5	=		X\$ 9=	920	OR	X\$18=	1	
AME	Independent	· 12	Minus	enDENT	CLAIM	= 2		X46=	84100	 OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	٠	OR	+270=		
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colu	mn 2)	(Column 3)	ج : ¨						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI-' TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	•	Minus	•• ′		=		X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***	ب	=	 	X40=			· X80=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR			
• 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
* If the entry in column 1 is less than the entry in column 2, write "U" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													